

WEST Search History

DATE: Monday, September 27, 2004

<u>Hide?</u>	<u>Set Name</u>	<u>Query</u>	<u>Hit Count</u>
<i>DB=USPT; PLUR=YES; OP=ADJ</i>			
<input type="checkbox"/>	L25	L23 and tray	0
<input type="checkbox"/>	L24	L23 and impression	0
<input type="checkbox"/>	L23	5476912.pn.	1
<i>DB=EPAB,JPAB,DWPI; PLUR=YES; OP=ADJ</i>			
<input type="checkbox"/>	L22	6255407	1
<input type="checkbox"/>	L21	19847116	0
<i>DB=USPT; PLUR=YES; OP=ADJ</i>			
<input type="checkbox"/>	L20	5476912	5
<i>DB=EPAB,JPAB,DWPI; PLUR=YES; OP=ADJ</i>			
<input type="checkbox"/>	L19	04068007	3
<i>DB=USPT; PLUR=YES; OP=ADJ</i>			
<input type="checkbox"/>	L18	koichi, katsuki.in.	0
<input type="checkbox"/>	L17	katsuki, koichi.in.	0
<i>DB=JPAB; PLUR=YES; OP=ADJ</i>			
<input type="checkbox"/>	L16	L15 and adhesive and silicone and acrylic	25
<input type="checkbox"/>	L15	1992.py.	368298
<input type="checkbox"/>	L14	1992.pn.	0
<i>DB=EPAB,JPAB,DWPI; PLUR=YES; OP=ADJ</i>			
<input type="checkbox"/>	L13	68007	10
<i>DB=USPT; PLUR=YES; OP=ADJ</i>			
<input type="checkbox"/>	L12	L11 and (adhesive or silicone)	33
<input type="checkbox"/>	L11	L10 not l6	50
<input type="checkbox"/>	L10	(dental or denture) and relining	86
<input type="checkbox"/>	L9	L8 not l7	6
<input type="checkbox"/>	L8	L6 and silicone	17
<input type="checkbox"/>	L7	L6 and adhesive	16
<input type="checkbox"/>	L6	dental same relining	36
<input type="checkbox"/>	L5	L4 and (siloxane or silicone)	66
<input type="checkbox"/>	L4	L1 and copolymer	151
<input type="checkbox"/>	L3	L1 and 528/31.ccls.	0
<input type="checkbox"/>	L2	L1 and 528/15.ccls.	0

L1 hosoi.in.

515

END OF SEARCH HISTORY